

jc860 U.S. PTO  
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PTO/SB/05 (11-00)  
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. 081513-77
First Inventor Marcos C. TZANNES et al.		Title Systems And Methods For LDPC Coded Modulation
Express Mail Label No.		
<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 22] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 06]</p> <p>5. Oath or Declaration [Total Sheets 1]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)</p> <p>i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies; or</p> <p>ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____/_____</p> <p>Prior application information: Examiner: _____ Group / Art Unit: _____</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>		
<b>19. CORRESPONDENCE ADDRESS</b>		
<input checked="" type="checkbox"/> Customer Number or Bar Code Label 22204 (Insert Customer No. or Attach bar code label here)		or <input checked="" type="checkbox"/> Correspondence address below
Name	Jason H. VICK	
Address	NIXON PEABODY LLP	
City	McLean	State VA Zip Code 22102
Country	United States	Telephone (703) 790-9110 Fax (703) 883-0370
Name (Print/Type)	Jason H. VICK	Registration No. (Attorney/Agent) 45,285
Signature	Date June 18, 2001	

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**FEE TRANSMITTAL  
FOR FY 2001**

Patent fees are subject to annual revision.

Complete if Known

Application Number	
Filing Date	June 18, 2001
First Named Inventor	Marcos C. TZANNES et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	081513-77

TOTAL AMOUNT OF PAYMENT \$1,158.00

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 19-2380

Deposit Account Name Nixon Peabody LLP

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- ☐
- Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:

- ☒
- Check
- ☐
- Credit Card
- ☐
- Money Order
- ☐
- Other

**FEE CALCULATION**

BASIC FILING FEE					
Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
101	201	710	355	Utility filing fee	710.00
106	206	320	160	Design filing fee	
107	207	490	245	Plant filing fee	
108	208	710	355	Reissue filing fee	
114	214	150	75	Provisional filing fee	

SUBTOTAL (1) \$710.00

2. **EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
36	-20** = 16	18.00	288.00
Independent Claims	5	-3** = 2	80.00 = 160.00
Multiple Dependent			0.00

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
103	203	18	9	Claims in excess of 20
102	202	80	40	Independent claims in excess of 3
104	204	270	135	Multiple dependent claim, if not paid
109	209	80	40	** Reissue independent claims over original patent
110	210	18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$448.00

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge - late filing fee or oath	
127	227	50	25	Surcharge - late provisional filing fee or cover sheet	
139	239	130	65	Non-English transaction	
147	247	2,520	1,260	For filing a request for <i>ex parte</i> reexamination	
112	212	920*	460*	Requesting publication of SIR prior to Examiner action	
113	213	1,840*	920*	Requesting publication of SIR after Examiner action	
115	215	110	55	Extension for reply within first month	
116	216	390	195	Extension for reply within second month	
117	217	890	445	Extension for reply within third month	
118	218	1,390	695	Extension for reply within fourth month	
128	228	1,890	945	Extension for reply within fifth month	
119	219	310	155	Notice of Appeal	
120	220	310	155	Filing a brief in support of an appeal	
121	221	270	135	Request for oral hearing	
138	238	1,510	755	Petition to institute a public use proceeding	
140	240	110	55	Petition to revive - unavoidable	
141	241	1,240	620	Petition to revive - unintentional	
142	242	1,240	620	Utility issue fee (or reissue)	
143	243	440	220	Design issue fee	
144	244	600	300	Plant issue fee	
122	222	130	65	Petitions to the Commissioner	
123	223	50	25	Petitions related to provisional applications	
126	226	180	90	Submission of Information Disclosure Stmt	
581	281	40	20	Recording each patent assignment per property (times number of properties)	
146	246	710	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	249	710	355	For each additional invention to be examined (37 CFR § 1.29(b))	
179	279	710	355	Request for Continued Examination (RCE)	
169	269	900	450	Request for expedited examination of a design application	
Other fee (specify) _____					

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$0.00

**SUBMITTED BY**

Name (Print/Type)	Jason H. VICK	Registration No.	45,285	Telephone	
Signature		(Attorney/Agent)		Date	

Complete (if applicable)

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